

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Southern District Of New York

Case number (if known): \_\_\_\_\_ Chapter 7

Check if this is an  
amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

12/15

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Adorn Fashions Inc.

2. All other names debtor used  
in the last 8 years

Include any assumed names,  
trade names and *doing business*  
as names

3. Debtor's federal Employer  
Identification Number (EIN)

1 3 - 2 9 4 3 1 2 4

4. Debtor's address

Principal place of business

1407 Broadway, Suite 1805

Number Street

Mailing address, if different from principal place  
of business

Number Street

P.O. Box

New York NY 10018

City State ZIP Code

City State ZIP Code

NEW YORK  
County

Location of principal assets, if different from  
principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

www.adornfashions.com

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
 Partnership (excluding LLP)  
 Other. Specify: \_\_\_\_\_

Debtor	Adorn Fashions Inc. Name		Case number (if known)
<p><b>7. Describe debtor's business</b></p> <p><b>A. Check one:</b></p> <p><input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A))  <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44))  <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A))  <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6))  <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3))  <input checked="" type="checkbox"/> None of the above</p> <hr/> <p><b>B. Check all that apply:</b></p> <p><input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501)  <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))</p> <hr/> <p><b>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <a href="http://www.naics.com/search/">http://www.naics.com/search/</a>.</b></p> <p style="text-align: center;"><u>4</u> <u>2</u> <u>4</u> <u>3</u></p>			
<b>8. Under which chapter of the Bankruptcy Code is the debtor filing?</b>	<p><b>Check one:</b></p> <p><input checked="" type="checkbox"/> Chapter 7  <input type="checkbox"/> Chapter 9  <input type="checkbox"/> Chapter 11. <b>Check all that apply:</b></p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every 3 years after that).  <input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  <input type="checkbox"/> A plan is being filed with this petition.  <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form.  <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.  <input type="checkbox"/> Chapter 12</p>		
<b>9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?</b>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. District _____ When _____ Case number _____            MM / DD / YYYY</p> <p>If more than 2 cases, attach a separate list.</p> <p>District _____ When _____ Case number _____            MM / DD / YYYY</p>		
<b>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</b>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Debtor _____ Relationship _____            District _____ When _____            MM / DD / YYYY</p> <p>List all cases. If more than 1, attach a separate list.</p> <p>Case number, if known _____</p>		

Debtor Adorn Fashions Inc. Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**11. Why is the case filed in this district?** *Check all that apply:*

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? \_\_\_\_\_

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Is the property insured?**  
 No  
 Yes. Insurance agency \_\_\_\_\_  
 Contact name \_\_\_\_\_  
 Phone \_\_\_\_\_

### Statistical and administrative information

**13. Debtor's estimation of available funds** *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

**14. Estimated number of creditors**

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input checked="" type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

**15. Estimated assets**

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor Name	Adorn Fashions Inc.			Case number (if known)
16. Estimated liabilities		<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
		<input type="checkbox"/> \$50,001-\$100,000	<input checked="" type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
		<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
		<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

### Request for Relief, Declaration, and Signatures

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

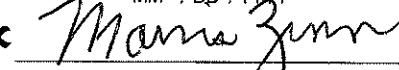
**17. Declaration and signature of authorized representative of debtor**

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

MM / DD / YYYY

 Morris Zinn

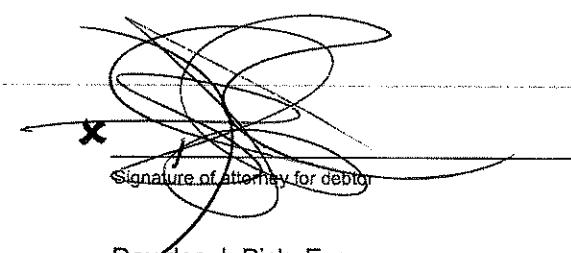
Signature of authorized representative of debtor

Morris Zinn

Printed name

Title President

**18. Signature of attorney**

 Douglas J. Pick, Esq.

Printed name

Pick & Zabicki LLP

Firm name

369 Lexington Avenue, 12th Floor

Number Street

New York

City

NY

ZIP Code

(212) 695-6000

Contact phone

dpick@picklaw.net

Email address

Bar number

State

UNITED STATES BANKRUPTCY COURT  
Southern District of New York

In re:

Adorn Fashions Inc.,

Debtor(s)

Case No. BKY

Chapter 7 Case

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

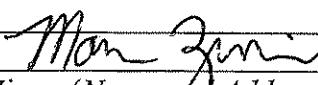
I, Morris Zinn, declare under penalty of perjury that I am the President of Adorn Fashions Inc., a New York corporation and that on January 18, 2016 the following resolution was duly adopted by the Sole Director of this corporation:

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 7 of Title 11 of the United States Code;

Be It Therefore Resolved, that Morris Zinn, President of this corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 7 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that Morris Zinn, President of this corporation, is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be It Further Resolved, that Morris Zinn, President of this corporation, is authorized and directed to employ Douglas J. Pick, Esq., attorney and the law firm of Pick & Zabicki LLP to represent the corporation in such bankruptcy case."

Executed on:	Signed: 
	Morris Zinn (Name and Address of Subscriber)

Fill in this information to identify the case:

Debtor name Adorn Fashions Inc.  
United States Bankruptcy Court for the: Southern District of New York  
Case number (if known): \_\_\_\_\_

Check if this is an amended filing

## Official Form 206Sum

### Summary of Assets and Liabilities for Non-Individuals

12/15

#### Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B* .....

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B* .....

\$ 0.00

1c. **Total of all property:**

Copy line 92 from *Schedule A/B* .....

\$ 0.00

#### Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Hold Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, at the bottom of page 1 of *Schedule D*.....

\$ 1,071,400.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of *Schedule E/F*.....

\$ 0.00

3b. **Total amount of claims of non-priority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F* .....

+ \$ 13,542,376.06

4. **Total liabilities**.....

Lines 2 + 3a + 3b

\$ 14,613,776.06



## 8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Traveler's Insurance

\$ Unknown

8.2. \_\_\_\_\_

\$ \_\_\_\_\_

## 9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 0.00

## Part 3: Accounts receivable

## 10. Does the debtor have any accounts receivable?

 No. Go to Part 4. Yes. Fill in the information below.

## 11. Accounts receivable

11a. 90 days old or less:	face amount	- doubtful or uncollectible accounts	= ..... →	Current value of debtor's interest
11b. Over 90 days old:	face amount	- doubtful or uncollectible accounts	= ..... →	\$ _____

## 12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ \_\_\_\_\_

## Part 4: Investments

## 13. Does the debtor own any investments?

 No. Go to Part 5. Yes. Fill in the information below.

## 14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____	\$ _____
14.2. _____	\$ _____

## 15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____	% _____	\$ _____
15.2. _____	% _____	\$ _____

## 16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	\$ _____
16.2. _____	\$ _____

## 17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.

Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
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20. Work in progress

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
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21. Finished goods, including goods held for resale

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
-------	----------------	----------	-------	----------

22. Other inventory or supplies

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
-------	----------------	----------	-------	----------

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$ _____
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24. Is any of the property listed in Part 5 perishable?

No

Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No

Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No

Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.

Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	---	---	------------------------------------

28. Crops—either planted or harvested

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

29. Farm animals Examples: Livestock, poultry, farm-raised fish

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

30. Farm machinery and equipment (Other than titled motor vehicles)

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

31. Farm and fishing supplies, chemicals, and feed

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

32. Other farming and fishing-related property not already listed in Part 6

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

## 33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

## 34. Is the debtor a member of an agricultural cooperative?

No

Yes. Is any of the debtor's property stored at the cooperative?

No

Yes

## 35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

No

Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_

## 36. Is a depreciation schedule available for any of the property listed in Part 6?

No

Yes

## 37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

No

Yes

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

## 38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.

Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	\$ _____	_____	\$ _____
40. Office fixtures	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software	\$ _____	_____	\$ _____
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles	\$ _____	_____	\$ _____
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

## 43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ \_\_\_\_\_

## 44. Is a depreciation schedule available for any of the property listed in Part 7?

No

Yes

## 45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No

Yes

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.

Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	---	------------------------------------

**47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

**48. Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

**49. Aircraft and accessories**

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

**50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$ _____
----------

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

No

Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

No

Yes

**Part 9: Real property****54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ \_\_\_\_\_

**57. Is a depreciation schedule available for any of the property listed in Part 9?**

No  
 Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

No  
 Yes

**Part 10: Intangibles and Intellectual Property****59. Does the debtor have any interests in intangibles or intellectual property?**

No. Go to Part 11.  
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites www.adornfashions.com	\$ _____	_____	\$ Unknown
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$ 0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No  
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No  
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No  
 Yes

#### Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

Total face amount — → doubtful or uncollectible amount \$

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

2012 Net Operating Loss

Tax year \$ Unknown  
 Tax year \$  
 Tax year \$

73. Interests in insurance policies or annuities

\$

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\$

Nature of claim

Amount requested \$

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\$

Nature of claim

Amount requested \$

76. Trusts, equitable or future interests in property

\$

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\$

\$

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No  
 Yes

## Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 0.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$ 0.00	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment, and collectibles. Copy line 43, Part 7.	\$ 0.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 0.00	
88. Real property. Copy line 56, Part 9. . . . .	→	\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 0.00	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 0.00

Fill in this information to identify the case:

Debtor name Adorn Fashions Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (if known):

 Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

## 2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
--	--

2.1 Creditor's name  
EPK Financial Corp.

Creditor's mailing address

See Attachment 1  
Dallas, Texas 75225

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account  
numberDo multiple creditors have an interest in the  
same property? No Yes. Specify each creditor, including this creditor,  
and its relative priority.

Describe debtor's property that is subject to a lien

Second Priority Security Interest Against All \$ 923,400.00 \$ 0.00

Assets

Describe the lien  
Security Agreement/UCC

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

Contingent

Unliquidated

Disputed

2.2 Creditor's name  
LSQ Funding Group L.C.Creditor's mailing address  
See Attachment 2

San Francisco, California 94105-3493

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account  
numberDo multiple creditors have an interest in the  
same property? No Yes. Have you already specified the relative  
priority? No. Specify each creditor, including this  
creditor, and its relative priority. Yes. The relative priority of creditors is  
specified on lines

Describe debtor's property that is subject to a lien

See Attachment 2 \$ Unknown \$ 0.00

X

Describe the lien  
Security Agreement/UCC

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

Contingent

Unliquidated

Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional  
Page, if any. \$ 1,071,400.00

**Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
<b>2.3 Creditor's name</b>	Describe debtor's property that is subject to a lien	
On Deck Capital, Inc.	Third Priority Security Interest Against All Assets	\$ 148,000.00      \$ 0.00
<b>Creditor's mailing address</b>		
1400 Broadway New York, New York 10018		
<b>Creditor's email address, if known</b>	Describe the lien Security Agreement/UCC	
	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Date debt was incurred</b>	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
<b>Last 4 digits of account number</b>		
<b>Do multiple creditors have an interest in the same property?</b>	As of the petition filing date, the claim is: Check all that apply.	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  _____ _____ _____		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
<b>2.4 Creditor's name</b>	Describe debtor's property that is subject to a lien	
<b>Creditor's mailing address</b>		
<b>Creditor's email address, if known</b>	Describe the lien	
<b>Date debt was incurred</b>	Is the creditor an insider or related party?	
<b>Last 4 digits of account number</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Do multiple creditors have an interest in the same property?</b>	Is anyone else liable on this claim?	
<input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  _____ _____ _____	As of the petition filing date, the claim is: Check all that apply.	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Attachment  
Debtor: Adorn Fashions Inc. Case No:

Attachment 1

d/b/a King Trade Capital, 5944 Luther Lane, Suite 300

Attachment 2

Buchalter Nemar, P.C., 55 Second Street, Suite 1700

First Priority Security Interest Against All Assets - Creditor Took Possession of  
Approximately \$10,000,000 of Collateral Against Secured Indebtedness Totaling  
Approximately \$11,000,000 - Current Balance Owed Net of Recovery on Collateral is  
Unknown

Fill in this information to identify the case:

Debtor Adorn Fashions Inc.United States Bankruptcy Court for the: Southern District of New YorkCase number  
(If known) \_\_\_\_\_ Check if this is an amended filing

## Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.  
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

**2.1 Priority creditor's name and mailing address**

Canada Revenue Agency

275 Pope Road, Suite 103

Summerside, PE, Canada, C1N 6A2

Date or dates debt was incurred

2014 &amp; 2015 - GST

Last 4 digits of account number \_\_\_\_\_

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( 8 )

As of the petition filing date, the claim is: \$ Unknown Priority amount \$ Unknown

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Basis for the claim:

Taxes and Other Government

Debts

Is the claim subject to offset?

No  
 Yes

**2.2 Priority creditor's name and mailing address**

NYC Dept. of Finance

345 Adams Street, 3rd Floor, Legal

Brooklyn, New York 11201

Date or dates debt was incurred

2014 &amp; 2015 Commercial Rent Tax

Last 4 digits of account number \_\_\_\_\_

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( 8 )

As of the petition filing date, the claim is: \$ Unknown Priority amount \$ Unknown

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Basis for the claim:

Taxes and Other Government

Debts

Is the claim subject to offset?

No  
 Yes

**2.3 Priority creditor's name and mailing address**\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date or dates debt was incurred

Last 4 digits of account number \_\_\_\_\_

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( \_\_\_\_\_ )

As of the petition filing date, the claim is: \$ \_\_\_\_\_ Priority amount \$ \_\_\_\_\_

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Basis for the claim:

Is the claim subject to offset?

No  
 Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 4 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address 12K Apparel, Inc. 1015 Croker Street #R37 Los Angeles, California 90021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: Trade Debt	\$ 13,230.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address 24/Seven Inc. 120 Wooster Street New York, New York 10012	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: General Goods/Services	\$ 6,500.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address 7th Avenue Stationers, Inc. 210 West 35th Street 2nd Floor New York, New York 10001	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: General Goods/Services	\$ 119.64
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address Abercrombie Accounting Group 517 Flinders Street Townsville City, Australia, QLD 4810	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Accounting Services	\$ 2,090.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address Accent Labels UK Ltd. Room 2302-2304 Well Tech Centre 9 Pat Tat Street San Po Kong, Hong Kong,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Trade Debt	\$ 607.27
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address AFLAC 1932 Wynnston Road Columbus, Georgia 31999-6005	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Insurance	\$ 310.16
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address AJSE Inc. d/b/a Sant Fe Finishing 2460 E. 12th Street Unit C Los Angeles, California 90021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1,904.70
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address Alba Wheels Up International Inc. 150-30 132nd Avenue Suite 208 Jamaica, New York 11434	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 58,476.93
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address Alyce Zinn 345 East 73rd Street Apt. 6G New York, New York 10021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 77,587.00
		Basis for the claim: <u>Loans</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address Alyce Zinn 345 East 73rd Street Apt. 6G New York, New York 10021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 117.20
		Basis for the claim: <u>Compensation/Expense Reimbursement</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address AME Express 901 W. Hyde Park Blvd. Inglewood, California 90302	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 86,600.16
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12	Nonpriority creditor's name and mailing address  American Express  P.O. Box 1270  Newark, New Jersey 07101-1270	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 54,050.77
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.13	Nonpriority creditor's name and mailing address  American Express  P.O. Box 1270  Newark, New Jersey 07101-1270	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,298.79
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14	Nonpriority creditor's name and mailing address  American Express  P.O. Box 1270  Newark, New Jersey 07101-1270	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 17,114.22
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15	Nonpriority creditor's name and mailing address  Annmarie Shapiro Menegaz  8 Raleigh Avenue  Cranford, New Jersey 07016	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,825.00
		Basis for the claim: Independent Contractor	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16	Nonpriority creditor's name and mailing address  Aphrodite Fashion Solutions  51 Bourke Road  Alexandria, Australia, NSW 2015	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,749.90
		Basis for the claim: Trade Debt	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.17	Nonpriority creditor's name and mailing address  APL Logistics  16220 N. Scottsdale Road Suite 400 Scottsdale, Arizona 85254	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 170.00
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18	Nonpriority creditor's name and mailing address  Apparel Group  250 Belmont Avenue Haledon, New Jersey 07508	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 22,955.54
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.19	Nonpriority creditor's name and mailing address  Atlas Print Solutions  589 8th Avenue 4th Floor New York, New York 10018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 81.68
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.20	Nonpriority creditor's name and mailing address  August  21 David Street Richmond, Australia, VIC 3121	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,500.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.21	Nonpriority creditor's name and mailing address  Automated Answering Systems  224 West 30th Street Suite 805 New York, New York 10001	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 615.14
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.22	Nonpriority creditor's name and mailing address Avery Dennison 15178 Collection Centre Drive Chicago, Illinois 60693	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 601.99
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.23	Nonpriority creditor's name and mailing address Barry Zinn 300 East 71st Street New York, New York 10021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,233.65
		Basis for the claim: <u>Expense Reimbursement</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.24	Nonpriority creditor's name and mailing address BDO 100 Park Avenue New York, New York 10017	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 45,622.00
		Basis for the claim: <u>Accounting Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.25	Nonpriority creditor's name and mailing address Beauticurve 16 Town Park, #5 Little Rock, Arkansas 72227	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 400.00
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.26	Nonpriority creditor's name and mailing address Bell Canada P.O. Box 8712 Succ. Centre-Ville Montreal, QC, Canada, H3C 3P6	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 438.60
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.27	Nonpriority creditor's name and mailing address  Benny Lau  Unknown	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 80,000.00
		Basis for the claim: <u>Expense Reimbursement</u>	
	Date or dates debt was incurred  Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28	Nonpriority creditor's name and mailing address  Berkshire Life Insurance  P.O. Box 644782  Pittsburgh, Pennsylvania 15264-4782	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,463.30
		Basis for the claim: <u>Insurance</u>	
	Date or dates debt was incurred  Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.29	Nonpriority creditor's name and mailing address  Bloomingdales  P.O. Box 183084  Columbus, Ohio 43218	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,319.34
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred  Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address  Bobbi Schwartz  c/o Steven Mitchell Sack, Esq. 110 East 59th Street, 19th Floor  New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ Unknown
		Basis for the claim: <u>Sales Commissions</u>	
	Date or dates debt was incurred  Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address  Bracco Agency Inc.  514 Larkfield Road Suite 4B  East Northport, New York 11731	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,058.67
		Basis for the claim: <u>Insurance</u>	
	Date or dates debt was incurred  Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.32	Nonpriority creditor's name and mailing address  Brother International (HK) Co. Limited  250 King's Road Fortress Tower Unit 1505B of 15/F Fortress Hill, Hong Kong, RV BVI	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 159,986.65
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.33	Nonpriority creditor's name and mailing address  California Transport Enterprises, inc.  P.O. Box 471 South Gate, California 90280	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 245.29
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.34	Nonpriority creditor's name and mailing address  Cando International Enterprise (HK) Limited  9/F, Kaili Masion, #608 Yingbin Roa, Shangyu District Shaoxing City, Zhejiang , China	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 5,675.00
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.35	Nonpriority creditor's name and mailing address  Capital Logistics & Warehouse Group Inc.  30 Passaic Street Woodridge, New Jersey 07075	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 102,943.35
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.36	Nonpriority creditor's name and mailing address  Capital One Bank USA, NA  P.O. Box 71083 Charlotte, North Carolina 28272-1083	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 11,859.01
		Basis for the claim: <u>Credit Card</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.37	Nonpriority creditor's name and mailing address Changzhou Yidele Apparel Co. Ltd.  33 E.N. Circle Road Jiangsu, China, 213200	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 11,340.00
		Basis for the claim: Trade Debt - Alleged Co-Debtor Liability is Disputed	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address Chase Card  P.O. Box 15153 Wilmington, Delaware 19886-5153	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 39,029.26
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address Chase Card  P.O. Box 15153 Wilmington, Delaware 19886-5153	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,977.03
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address Chase Card  P.O. Box 15153 Wilmington, Delaware 19886-5153	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,198.26
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41	Nonpriority creditor's name and mailing address Chase Card  P.O. Box 15153 Wilmington, Delaware 19886-5153	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12,997.80
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.42	Nonpriority creditor's name and mailing address  Checkpoint Systems Inc.  P.O. Box 742884 Atlanta, Georgia 30374	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 277.96
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.43	Nonpriority creditor's name and mailing address  CIT Technology Financial Services Inc.  21146 Network Place Chicago, Illinois 60673-1211	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,971.82
		Basis for the claim: <u>Equipment Finance/Lease</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.44	Nonpriority creditor's name and mailing address  Citi Business Card  Processing Center Des Moines, Iowa 50363	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 13,901.86
		Basis for the claim: <u>Credit Card</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.45	Nonpriority creditor's name and mailing address  City Fashion Express  P.O. Box 894829 Los Angeles, California 90189-4829	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,078.58
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.46	Nonpriority creditor's name and mailing address  City Logistics & Transport Inc.  P.O. Box 894833 Los Angeles, California 90189-4833	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,956.98
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.47	Nonpriority creditor's name and mailing address  Clique Media  360 N. La Cienega Blvd. 3rd Floor B Los Angeles, California 90048	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 5,000.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.48	Nonpriority creditor's name and mailing address  Cloud Forward  183 Tucker Avenue San Francisco, California 94134	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,809.41
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.49	Nonpriority creditor's name and mailing address  Cmm Inc./Conte Model Mgmt Inc.  P.O. Box 522 Lyndhurst, New Jersey 07071	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 8,280.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.50	Nonpriority creditor's name and mailing address  Columbia Omni Corp.  14 West 33rd Street New York, New York 10001	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,340.20
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.51	Nonpriority creditor's name and mailing address  Con Edison  4 Irving Place Bankruptcy Group, Rm. 1875-S New York, New York 10003	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 73.14
		Basis for the claim: <u>Utilities</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.52	Nonpriority creditor's name and mailing address  Cosmopolitan  P.O. Box 6000 Harlan, Iowa 51593-5532	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 15.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.53	Nonpriority creditor's name and mailing address  Curvy Fashionista  Unknown	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,100.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.54	Nonpriority creditor's name and mailing address  Delmar International Inc.  10636 Cote De Liesse Lachine, QC, Canada, H8T 1A5	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 14,577.85
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.55	Nonpriority creditor's name and mailing address  Earthlink Business  P.O. Box 88104 Chicago, Illinois 60680-1104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,044.17
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.56	Nonpriority creditor's name and mailing address  EFax.com  6922 Hollywood Blvd. Suite 500 Hollywood, California 90028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 64.75
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.57	Nonpriority creditor's name and mailing address  Electrolux Home Products, Inc.  P.O. Box 212549  Augusta, Georgia 30917	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 289.97
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.58	Nonpriority creditor's name and mailing address  Ever Concord  452 N. Oak Street  Inglewood, California 90302	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 300.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.59	Nonpriority creditor's name and mailing address  EZ Worldwide Express  669 Division Street  Elizabeth, New Jersey 07201	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 11.59
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.60	Nonpriority creditor's name and mailing address  FedEx  P.O. Box 371461  Pittsburgh, Pennsylvania 15250-1461	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 494.26
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.61	Nonpriority creditor's name and mailing address  FedEx Freight  P.O. Box 223125  Pittsburgh, Pennsylvania 15251-2125	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 13,654.87
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.62	Nonpriority creditor's name and mailing address  FedEx Trade Networks Transport & Brokerage (Canada), Inc.  Box 916200 P.O. Box 4090, Station A  Toronto, ON, Canada, M5W 0E9	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1,604.12
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.63	Nonpriority creditor's name and mailing address  Fineline Technologies, Inc.  P.O. Box 934219  Atlanta, Georgia 31193	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,171.65
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.64	Nonpriority creditor's name and mailing address  Fourth Floor Fashion  10100 Santa Monica Blvd. Suite 900  Los Angeles, California 90067	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,300.00
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.65	Nonpriority creditor's name and mailing address  FP Mailing Solutions  P.O. Box 4510  Carol Stream, Illinois 60197-4510	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 55.36
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.66	Nonpriority creditor's name and mailing address  G X S  P.O. Box 640371  Pittsburgh, Pennsylvania 15264-0371	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,672.31
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.67	Nonpriority creditor's name and mailing address <u>Garrity, Graham, Murphy, Garofalo &amp; Flinn</u> <u>72 Eagle Rock Avenue Suite 350</u> <u>East Hanover, New Jersey 07936</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 9,255.88
		Basis for the claim: <u>Legal Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.68	Nonpriority creditor's name and mailing address <u>Gerber Technology</u> <u>P.O. Box 95060</u> <u>Chicago, Illinois 60694-5060</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 12,715.51
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.69	Nonpriority creditor's name and mailing address <u>Glamour Magazine</u> <u>P.O. Box 37688</u> <u>Boone, Iowa 50037-0688</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 16.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.70	Nonpriority creditor's name and mailing address <u>Gliberto Perez</u> <u>Unknown</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 28.76
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.71	Nonpriority creditor's name and mailing address <u>GMG Transwest Corp.</u> <u>65 Orville Drive</u> <u>Bohemia, New York 11716</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 74,140.19
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.72	Nonpriority creditor's name and mailing address Go Studios 245 West 29th Street 7th Floor New York, New York 10001	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 7,704.49
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.73	Nonpriority creditor's name and mailing address Greenberg Traurig LLP 333 SE 2nd Avenue Suite 4400 Miami, Florida 33131	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 10,000.00
		Basis for the claim: <u>Legal Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.74	Nonpriority creditor's name and mailing address Grunfeld, Desiderio, Lebowitz, Silverman & Klestadt LLP 399 Park Avenue 25th Floor New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 503.25
		Basis for the claim: <u>Legal Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.75	Nonpriority creditor's name and mailing address Guangzhou Textiles Holdings Ltd. 6/F, Guangtex Building 438 Dongfeng Road, Vexiu District Guangzhou, Guangdong, China.	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 340,413.30
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.76	Nonpriority creditor's name and mailing address Hefu Garments Co. Ltd. 8th Floor, Wanchun Building Baozou Road Quanzhou, Fujian, China.	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 59,331.52
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

**Part 2: Additional Page**

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Amount of claim

3.77	Nonpriority creditor's name and mailing address  IESI-NY Corporation  P.O. Box 660654  Dallas, Texas 75266-0654	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 122.67
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.78	Nonpriority creditor's name and mailing address  IFS (N.Y.) Inc.  147-32 Farmers Blvd. 2nd Floor  Jamaica, New York 11434	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.80
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.79	Nonpriority creditor's name and mailing address  IMD Systems  100 Alexis Nihon Suite 203  St. Laurent, QC, Canada, H4M 2N7	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,172.12
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.80	Nonpriority creditor's name and mailing address  Intuisherip  P.O. Box 30015 Dept. 217  Salt Lake City, Utah 84130	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 208.15
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.81	Nonpriority creditor's name and mailing address  Ithan Zinn  300 East 71st Street  New York, New York 10021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,482.70
		Basis for the claim: <u>Compensation/Expense Reimbursement</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.82	Nonpriority creditor's name and mailing address  Ithan Zinn  300 East 71st Street New York, New York 10021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 19,250.00
		Basis for the claim: Loans	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.83	Nonpriority creditor's name and mailing address  Jackie Meng  Room 201, No. 33 Building Baosteel 8 Village Baoshan, Hong Kong, 201999	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 9,000.00
		Basis for the claim: Independent Contractor	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.84	Nonpriority creditor's name and mailing address  JAG Models  20 West 20th Street Suite 605 New York, New York 10011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,720.00
		Basis for the claim: General Goods/Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.85	Nonpriority creditor's name and mailing address  James A. Quinton, Esq.  488 Madison Avenue Suite 1120 New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 8,625.00
		Basis for the claim: Legal Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.86	Nonpriority creditor's name and mailing address  Jaral Fashion Consultants, Inc.  P.O. Box 498 Springfield, New Jersey 07081	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 9,838.35
		Basis for the claim: Unknown	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

**Part 2: Additional Page**

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Amount of claim

3.87	Nonpriority creditor's name and mailing address  Ji Feng Garment Co. Ltd.  No. 49 Yi Heng Road Dongken District, Xintang Zengheng Guangzhou, Guandong, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1,229,327.94
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.88	Nonpriority creditor's name and mailing address  Jiangsu Guotai Enterprises Co. Ltd.  15-22F International Trade Center Renmin Road Zhangjiagang, Jiangsu, China, 215600	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,084,703.65
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.89	Nonpriority creditor's name and mailing address  Jianmen Hao Yin Trading Co. Ltd.  15-22F International Trade Center Rm. 1501, Renmin Road Tezhengjiang, China, 215600	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 143,715.26
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.90	Nonpriority creditor's name and mailing address  Jin Tan Semar Limited  Rm. 709, Sufa Building 340 Hongwu Road Nanjing, Jiangsu, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 496,527.75
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.91	Nonpriority creditor's name and mailing address  JJMC Design d/b/a Shaghai Textile Decoration Corp.  9838 Joe Vargas Way Unit F South El Monte, California 91733	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,203,525.14
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.92	Nonpriority creditor's name and mailing address  Juana Miranda  533 Genva Avenue  Claremont, California 91711	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 500.00
		Basis for the claim: Unknown	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.93	Nonpriority creditor's name and mailing address  Junsheng Clothing Co. Ltd.  See Attachment 1  Dongguan, Guandong, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 110,589.21
		Basis for the claim: Trade Debt	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.94	Nonpriority creditor's name and mailing address  Karen Greenstein  675 Dr. Frederick Philips  Montreal, QC, Canada, H4M 2W4	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 21,000.00
		Basis for the claim: Salary/Sale Commissions	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.95	Nonpriority creditor's name and mailing address  Kelly Funabashi Osbourne  1092 Pacific Street Apt. 1  Brooklyn, New York 11238	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,200.00
		Basis for the claim: Independent Contractor	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.96	Nonpriority creditor's name and mailing address  Key Bank  P.O. Box 89438  Cleveland, Ohio 44101	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12,302.93
		Basis for the claim: Credit Card	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.97	Nonpriority creditor's name and mailing address  Kick Productions  c/o Carson Kressley 10 Park Avenue, 23F New York, New York 10018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 253.54
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.98	Nonpriority creditor's name and mailing address  Kilogram Garment Company  Xinyin Industrial Village Xintang Industrial Processing Zone Guangzhou, Guangdong, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 21,373.76
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.99	Nonpriority creditor's name and mailing address  KIP/PR  154 Grand Street 6th Floor New York, New York 10013	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,560.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.100	Nonpriority creditor's name and mailing address  Label Care Plus  3565 Rue Jarry Est. #502 Montreal, Quebec, H1Z 2G1	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 384.03
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.101	Nonpriority creditor's name and mailing address  Larry Platenburg  1050 George Street, #9L New Brunswick, New Jersey 08901	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,058.75
		Basis for the claim: <u>Independent Contractor</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.102	Nonpriority creditor's name and mailing address  Licco Company Inc. a/k/a Licco Corp.  7/F Pearl Oriental Tower 225 Nathan Road Tsimshatsui, Hong Kong,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ Unknown
		Basis for the claim: <u>Loans - Alleged Co-Debtor Liability is Disputed</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.103	Nonpriority creditor's name and mailing address  LM Cohen & Company CPA  1359 Broadway Suite 1202 New York, New York 10018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,750.00
		Basis for the claim: <u>Accounting Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104	Nonpriority creditor's name and mailing address  Lorrie Joy Markman  c/o Wilson Elser et al. 1133 Westchester Avenue White Plains, New York 10604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ Unknown
		Basis for the claim: <u>Employee Rights</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105	Nonpriority creditor's name and mailing address  Made in Brighton  Unit 1.8 Paintworks Bath Road Bristol, UK, BS4 3EH	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2,250.00
		Basis for the claim: <u>Unknown</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.106	Nonpriority creditor's name and mailing address  Mainfreight, Inc.  1400 Glenn Curtiss Carson, California 90746	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 48,584.97
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.107	Nonpriority creditor's name and mailing address  Man Lei Cheung a/k/a Nina Cheung  10453 48th Court E. Parrish, Florida 34219	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ Unknown
		Basis for the claim: Loans - Alleged Co-Debtor Liability is Disputed	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.108	Nonpriority creditor's name and mailing address  Marc Saltzman  c/o Steven Mitchell Sack, Esq. 110 East 59th Street, 19th Floor New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ Unknown
		Basis for the claim: Sales Commissions	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.109	Nonpriority creditor's name and mailing address  Maria Ortega  275 Ft. Washington Avenue #7B New York, New York 10032	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 400.00
		Basis for the claim: Unknown	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.110	Nonpriority creditor's name and mailing address  Marie Claire/Hearst Publishing  P.O. Box 25883 Lehigh Valley, Pennsylvania 18002	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 11,000.00
		Basis for the claim: General Goods/Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.111	Nonpriority creditor's name and mailing address  Mario's Private Car & Limousine Service  217 West 259th Street Suite 24 Bronx, New York 10471	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 616.00
		Basis for the claim: General Goods/Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.112 Nonpriority creditor's name and mailing address Marlee Hirsch 3 Division Street Somerville, New Jersey 08876	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 22.29
Basis for the claim: Compensation/Expense Reimbursement		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.113 Nonpriority creditor's name and mailing address Marlin Leasing P.O. Box 13604 Philadelphia, Pennsylvania 19101-3604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 424.90
Basis for the claim: Equipment Finance/Lease		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.114 Nonpriority creditor's name and mailing address Matty Lam 49 Sunset Avenue Staten Island, New York 10314	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,350.00
Basis for the claim: Compensation/Expense Reimbursement		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.115 Nonpriority creditor's name and mailing address Morris Zinn 234 Willard Drive Hewlett, New York 11557	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,159.10
Basis for the claim: Compensation/Expense Reimbursement		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
3.116 Nonpriority creditor's name and mailing address Morris Zinn 234 Willard Drive Hewlett, New York 11557	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,858,411.26
Basis for the claim: Loans		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

**Part 2: Additional Page**

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Amount of claim

3.117	Nonpriority creditor's name and mailing address  New England Apparel Club  c/o Steven Mitchell Sack, Esq. 110 East 59th Street, 19th Floor New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 0.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.118	Nonpriority creditor's name and mailing address  Nicole Spitz  2005 Laura Lane Harrisburg, Pennsylvania 17110	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 300.00
		Basis for the claim: <u>Compensation/Expense Reimbursement</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.119	Nonpriority creditor's name and mailing address  Ningbo Huayi Garments Co. Ltd.  No. 11, Dongqian Lake Area Yinxian Avenue Ningbo, Zhejiang, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 68,533.30
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.120	Nonpriority creditor's name and mailing address  Ningbo Ningshing Trading Group Inc.  Tianning Mansion 138 Zhongshan Road West Ningbo City, Zhejiang, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 618,224.60
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.121	Nonpriority creditor's name and mailing address  One Source Risk Mgmt. & Funding  30 Saint Laurent Drive Hudson, New Hampshire 03051	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 13,778.00
		Basis for the claim: <u>Insurance</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

**Part 2: Additional Page**

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Amount of claim

3.122 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Paul Kelley 45 Lincoln Way, #5 San Francisco, California 94122	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 5,434.29
Date or dates debt was incurred	Basis for the claim: Unknown	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.123 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Penn Mutual Life Insurance Company Payment Processing Center P.O. Box 7460 Philadelphia, Pennsylvania 19101-7460	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 78.49
Date or dates debt was incurred	Basis for the claim: Insurance	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.124 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Perfect Way Development Limited Rm. 1201, No. 528 Hungxu Road Fengdang Village Dusnangang Town, Shanghai, China, 201103	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 36,071.84
Date or dates debt was incurred	Basis for the claim: Trade Debt	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.125 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Performance Team P.O. Box 515176 Los Angeles, California 90051-5176	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,256.19
Date or dates debt was incurred	Basis for the claim: General Goods/Services	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.126 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Perry Fish 4802 N. Seeley Avenue, #2 Chicago, Illinois 60625	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 345.00
Date or dates debt was incurred	Basis for the claim: Unknown	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

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Amount of claim

3.127	Nonpriority creditor's name and mailing address  Philadelphia Indemnity Insurance Co.  c/o Wilson Elser et al. 1133 Westchester Avenue White Plains, New York 10604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 107,000.00
		Basis for the claim: <u>See Attachment 2</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.128	Nonpriority creditor's name and mailing address  Pinghu Galaxy Garment Company  Hongni Development Zone Danghu Street Pinghu City, Zhejiang, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,396,471.85
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.129	Nonpriority creditor's name and mailing address  Pinghu Lian Garment Company  No. 192, 206 Danghu East Road Danghu Street Pinghu City, Zhejiang, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 87,793.02
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.130	Nonpriority creditor's name and mailing address  Pinghu Pingchen Garments Co. Ltd.  Fengdang Industrial Zone Huanggu Pinghu Jiaxing, Zhejiang, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 313,395.80
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.131	Nonpriority creditor's name and mailing address  Platzer, Swergold, Levine, Katz & Jaslow LLP  475 Park Avenue South New York, New York 10016	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 10,796.50
		Basis for the claim: <u>Legal Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.132 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Qingdao Sunwell Garments Co. Ltd.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 682,608.70
No. 22 Shandong Road Junfu Mansion, Building B, 20C Qingdao, China,	Basis for the claim: Trade Debt	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.133 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
RGB Fast Fashion	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,900.00
116 First Place, #2 Brooklyn, New York 11231	Basis for the claim: Trade Debt	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.134 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Ricky Zinn	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,899.89
300 East 71st Street New York, New York 10021	Basis for the claim: Loans	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.135 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Ricky Zinn	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12,904.26
300 East 71st Street New York, New York 10021	Basis for the claim: Compensation/Expense Reimbursement	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.136 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Royal Imaging NY LLC	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,669.00
320 West 37th Street Suite 1102 New York, New York 10018	Basis for the claim: General Goods/Services	
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

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Amount of claim

3.137	Nonpriority creditor's name and mailing address  R-Pac International Corp.  132 West 36th Street New York, New York 10018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 17.82
		Basis for the claim: <u>Trade Debt</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.138	Nonpriority creditor's name and mailing address  Ruskin Moscou Faltischek, P.C.  855 Franklin Avenue Garden City, New York 11530	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19,068.45
		Basis for the claim: <u>Legal Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.139	Nonpriority creditor's name and mailing address  Salon Marrow Newman & Broudy LLP  292 Madison Avenue 6th Floor New York, New York 10017	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 23,343.86
		Basis for the claim: <u>Legal Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.140	Nonpriority creditor's name and mailing address  Samantha Isom  524 Classon Avenue Brooklyn, New York 11238	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,650.00
		Basis for the claim: <u>Unknown</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.141	Nonpriority creditor's name and mailing address  Sara Computers Inc.  40 West 37th Street Suite 1104 New York, New York 10165	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 29,482.37
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.142 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Sarah Melville 72 Stratford Place New York, New York 11791	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 0.00
Date or dates debt was incurred	Basis for the claim: Compensation	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.143 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Sarah Rae Vargas 2647 Pecos Circle Montgomery, Illinois 60538	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,000.00
Date or dates debt was incurred	Basis for the claim: Unknown	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.144 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Scanwell Logistics 1995 Linden Blvd. Elmont, New York 11003	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 36,097.55
Date or dates debt was incurred	Basis for the claim: Freight/Shipping Services	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.145 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Sewing Collection Inc. 3113 E. 26th Street Vernon, California 90058	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 42.00
Date or dates debt was incurred	Basis for the claim: Trade Debt	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.146 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Shanghai U P Trade Co. Ltd. Rm. 101, No. 66 Songtao Road Pudong New District Shanghai, China,	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 156,956.82
Date or dates debt was incurred	Basis for the claim: Trade Debt	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 2: Additional Page

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Amount of claim

3.147 Nonpriority creditor's name and mailing address Shanghai Wintex Import & Export Co. Ltd. Room 2105, 200 Siping Road Syntex International Building Shanghai, China, 200086	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 112,171.85
Basis for the claim: Trade Debt		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.148 Nonpriority creditor's name and mailing address Sheehan & Company 437 Madison Avenue 29th Floor New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 7,285.00
Basis for the claim: Unknown		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.149 Nonpriority creditor's name and mailing address ShipStation 2815 Exposition Blvd. Austin, Texas 78703	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 997.30
Basis for the claim: Freight/Shipping Services		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.150 Nonpriority creditor's name and mailing address Shootdigital 23 East 4th Street New York, New York 10003	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,333.00
Basis for the claim: General Goods/Services		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.151 Nonpriority creditor's name and mailing address Shorenstein Realty Services East LLC c/o Jeremy Krantz, Esq. 122 East 42nd Street, Suite 1518 New York, New York 10168	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
Basis for the claim: Rent/Lease Obligations		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		

**Part 2: Additional Page**

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Amount of claim

3.152 Nonpriority creditor's name and mailing address  Sircle Media  115 East 57th Street 11th Floor New York, New York 10022	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 10,000.00
Basis for the claim: <u>General Goods/Services</u>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.153 Nonpriority creditor's name and mailing address  SML Inc.  777 Main Street Lewiston, Maine 04240	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,488.58
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.154 Nonpriority creditor's name and mailing address  Sofia Beskanova  31-85 Crescent Avenue Apt. 309 Astoria, New York 11106	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 800.00
Basis for the claim: <u>Unknown</u>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.155 Nonpriority creditor's name and mailing address  Source ID  9000 Henri Bourassa West St. Laurent, QC, Canada, H4S 1L5	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 334.19
Basis for the claim: <u>Trade Debt</u>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.156 Nonpriority creditor's name and mailing address  Spring  P.O. Box 4181 Carol Stream, Illinois 60197-4181	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 571.31
Basis for the claim: <u>Telephone Services</u>		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		

## Part 2: Additional Page

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Amount of claim

3.157 Nonpriority creditor's name and mailing address <u>Springtex International Co. Ltd.</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 124,227.90
5/F Springtex Building Lijiaqiao, Qiyun Road Ningbo, Zhejiang, China,	Basis for the claim: <u>Trade Debt</u>	
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.158 Nonpriority creditor's name and mailing address <u>SPS Commerce</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,056.00
333 South 7th Street Suite 1000 Minneapolis, Minnesota 55402	Basis for the claim: <u>General Goods/Services</u>	
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.159 Nonpriority creditor's name and mailing address <u>Staples Advantage</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,772.35
P.O. Box 415256 Boston, Massachusetts 02241-4061	Basis for the claim: <u>General Goods/Service</u>	
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.160 Nonpriority creditor's name and mailing address <u>Steven Feiges</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 129.78
1013 Saint Croix Street Hudson, Wisconsin 54016	Basis for the claim: <u>Sales Commissions</u>	
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.161 Nonpriority creditor's name and mailing address <u>Steven Swedlow</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ Unknown
c/o Steven Mitchell Sack, Esq. 110 East 59th Street, 19th Floor New York, New York 10022	Basis for the claim: <u>Sales Commissions</u>	
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		

## Part 2: Additional Page

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Amount of claim

3.162 Nonpriority creditor's name and mailing address Studio on Fire 825 Carleton Street St. Paul, Minnesota 55114	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 747.50
Basis for the claim: General Goods/Services		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.163 Nonpriority creditor's name and mailing address Suzhou Broadwide Imp. & Exp. Co. Ltd. No. 1 Tianedang Road Wuzhong Plaza Suzhou, Jiangsu, China, 215104	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 0.00
Basis for the claim: Trade Debt		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.164 Nonpriority creditor's name and mailing address Suzhou Guoxin Wangshun Import & Export Co. Ltd. No. 105, Shanghai Road Suzhou, Jiangsu, China, 215400	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 130,530.60
Basis for the claim: Trade Debt		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.165 Nonpriority creditor's name and mailing address Suzhou Xinda Huatai Imp. & Exp. Co., Ltd. No. 485 Panxu Road Canglang District Suzhou, Jiangsu, China, 215007	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 403,894.40
Basis for the claim: Trade Debt		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		
3.166 Nonpriority creditor's name and mailing address Suzhou Yuanda Enterprise Co. Ltd. No. 1 Tianedang Road Wuzhong Industry Plaza Suzhou, Jiangsu, China,	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 693,274.03
Basis for the claim: Trade Debt		
Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number		

## Part 2: Additional Page

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Amount of claim

3.167 Nonpriority creditor's name and mailing address  
Sylvia Zelinka

As of the petition filing date, the claim is:  
Check all that apply.

Contingent  
 Unliquidated  
 Disputed  
 Liquidated and neither contingent nor disputed

\$ 1,505.00

11231 NW 5th Street  
Plantation Acre, Florida 33325

Basis for the claim: Sales Commissions

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

No  
 Yes

3.168 Nonpriority creditor's name and mailing address  
Texfabco

As of the petition filing date, the claim is:  
Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ 955.50

262 West 38th Street Suite 1501  
New York, New York 10018

Basis for the claim: Trade Debt

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

No  
 Yes

3.169 Nonpriority creditor's name and mailing address  
TGI Office Automation

As of the petition filing date, the claim is:  
Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ 130.66

120 3rd Street  
Brooklyn, New York 15264-2111

Basis for the claim: Equipment Finance/Lease

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

No  
 Yes

3.170 Nonpriority creditor's name and mailing address  
TGI Office Automation

As of the petition filing date, the claim is:  
Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ 1,225.12

120 3rd Street  
Brooklyn, New York 15264-2111

Basis for the claim: Equipment Finance/Lease

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

No  
 Yes

3.171 Nonpriority creditor's name and mailing address  
The Gilbert Company

As of the petition filing date, the claim is:  
Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ 147,470.48

1000 Riverside Drive  
Keasbey, New Jersey 08832

Basis for the claim: General Goods/Services

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

No  
 Yes

## Part 2: Additional Page

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Amount of claim

3.172	Nonpriority creditor's name and mailing address  The Style Council  242 West 36th Street 14th Floor New York, New York 10018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 3,215.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.173	Nonpriority creditor's name and mailing address  Time Warner  41-61 Kissena Blvd. Flushing, New York 11355	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 2,559.73
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.174	Nonpriority creditor's name and mailing address  Tom Cody Design  260 W. 39th Street 6th Floor New York, New York 10018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,000.00
		Basis for the claim: <u>Unknown</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.175	Nonpriority creditor's name and mailing address  Tor LLC  16835 Algonquin Street, #195 Huntington Beach, California 92649	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 5,305.00
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.176	Nonpriority creditor's name and mailing address  Towerstream  P.O. Box 414061 Boston, Massachusetts 02241-4061	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 1,150.00
		Basis for the claim: <u>General Goods/Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.177	Nonpriority creditor's name and mailing address  Travelers P.O. Box 660317 Dallas, Texas 75266-0317	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$33,915.83
		Basis for the claim: <u>Insurance</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.178	Nonpriority creditor's name and mailing address  Travelers Auto P.O. Box 660307 Dallas, Texas 75266-0307	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$105.91
		Basis for the claim: <u>Insurance</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.179	Nonpriority creditor's name and mailing address  U.S. Customs and Border Protection Revenue Division 6650 Telecom Drive, Suite 100 Indianapolis, Indiana 46278	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$10,322.42
		Basis for the claim: <u>Customs Duties</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.180	Nonpriority creditor's name and mailing address  ULG West 1000 New County Road Secaucus, New Jersey 07094	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$80,443.49
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.181	Nonpriority creditor's name and mailing address  Union Logistics Inc. 950 S. Hatcher Avenue City of Industry, California 91748	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$273,850.66
		Basis for the claim: <u>Freight/Shipping Services</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

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Amount of claim

3.182 Nonpriority creditor's name and mailing address Verified Label & Print Inc. 7905 Hopi Place Tampa, Florida 33634	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 509.27
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Trade Debt	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.183 Nonpriority creditor's name and mailing address Veriship 1000 College Blvd. Suite 235 Overland Park, Kansas 66210	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 9,284.94
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Freight/Shipping Services	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.184 Nonpriority creditor's name and mailing address Verizon Wireless P.O. Box 408 Newark, New Jersey 07101-0408	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 582.32
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Telephone Service	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.185 Nonpriority creditor's name and mailing address Verna Defoe Unknown	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 0.00
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Unknown	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.186 Nonpriority creditor's name and mailing address Visual 2000 International Inc. 8690 Parc Ave., 2nd Floor Montreal, QC, Canada, H2N 1Y8	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,291.00
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: General Goods/Services	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

## Part 2: Additional Page

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Amount of claim

3.187	Nonpriority creditor's name and mailing address  WGSN Inc.  130 Fifth Avenue 7th Floor New York, New York 10011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 15,221.81
		Basis for the claim: Trade Debt	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.188	Nonpriority creditor's name and mailing address  Wilhelmina International Ltd.  300 Park Avenue South New York, New York 10010	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,700.00
		Basis for the claim: General Goods/Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.189	Nonpriority creditor's name and mailing address  Worldwide Express  116 North West Street Suite 200 Raleigh, North Carolina 27603	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 28,573.81
		Basis for the claim: Freight/Shipping Services	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.190	Nonpriority creditor's name and mailing address  Wright National Flood Insurance  P.O. Box 33070 St. Petersburg, Florida 33733-8003	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,179.00
		Basis for the claim: Insurance	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.191	Nonpriority creditor's name and mailing address  Ye Kuang  Unknown	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 250.00
		Basis for the claim: Unknown	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

## 3.192 Nonpriority creditor's name and mailing address

YRC Freight

P.O. Box 7914

Overland Park, Kansas 66211

As of the petition filing date, the claim is:

Check all that apply.

Contingent  
 Unliquidated  
 Disputed  
 Liquidated and neither contingent nor disputed

\$ 3,517.40

Basis for the claim: Freight/Shipping Services

Date or dates debt was incurred

\_\_\_\_\_

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

\_\_\_\_\_

## 3.193 Nonpriority creditor's name and mailing address

Zhejiang Orient Holly Trading Co., Ltd.

Room 2601, No. 12 West Lake Avenue

Hangzhou, Zhejiang, China,

As of the petition filing date, the claim is:

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ 520.00

Basis for the claim: Trade Debt

Date or dates debt was incurred

\_\_\_\_\_

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

\_\_\_\_\_

## 3.194 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ \_\_\_\_\_

Basis for the claim: \_\_\_\_\_

Date or dates debt was incurred

\_\_\_\_\_

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

\_\_\_\_\_

## 3.195 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ \_\_\_\_\_

Basis for the claim: \_\_\_\_\_

Date or dates debt was incurred

\_\_\_\_\_

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

\_\_\_\_\_

## 3.196 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

Contingent  
 Unliquidated  
 Disputed

\$ \_\_\_\_\_

Basis for the claim: \_\_\_\_\_

Date or dates debt was incurred

\_\_\_\_\_

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

\_\_\_\_\_

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	Kenneth D. Sugarman, Esq. 652 Broadway New York, New York 213200	Line 3.37 <input type="checkbox"/> Not listed. Explain _____	_____
4.2.	Rosenveig Strauber Waxman 3500 Boul. De Maisonneuve Ouest, Suite 1600 Westmount, QC, Canada, H3Z 3C1	Line 3.62 <input type="checkbox"/> Not listed. Explain _____	_____
4.3.	Don A. Leviton, Esq. Brown & Joseph Ltd., 2550 West Golf Road, Ste. 300 Rolling Meadows, Illinois 60008	Line 3.75 <input type="checkbox"/> Not listed. Explain _____	_____
4.4.	Atradius Collections Inc. 1200 Arlington Heights Road, Suite 410 Itasca, Illinois 60143	Line 3.90 <input type="checkbox"/> Not listed. Explain _____	_____
4.5.	Michael Samuel, Esq. Samuel & Stein, 38 West 32nd Street, Ste. 1110 New York, New York 10001	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.6.	Don A. Leviton, Esq. Brown & Joseph Ltd., 2550 West Golf Road, Ste. 300 Rolling Meadows, Illinois 60008	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.7.	Hanoch Sheps, Esq. Messner Reeves LLP, 733 Third Avenue, 15th Fl. New York, New York 10017	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.8.	Olivier DuPont, Esq. The DuPont Law Group PLLC, 61 Broadway, Ste. 3000 New York, New York 10006	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.9.	William Lee Kinnally, Jr., Esq. 665 Fifth Avenue New York, New York 10022	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.10.	Steven Mitchell Sack, Esq. 110 East 59th Street, 19th Floor New York, New York 10022	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.11.	Brendan Scott, Esq. Klestadt Winters et al., 570 Seventh Avenue, 17th Fl. New York, New York 10018	Line See <input type="checkbox"/> Not listed. Explain _____	_____
4.12.	Brian Neff, Esq. Schiff Hardin LLP, 666 Fifth Avenue, 17th Fl. New York, New York 10103	Line See <input type="checkbox"/> Not listed. Explain _____	_____

**Part 3: Additional Page for Others to Be Notified About Unsecured Claims**

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.13	Brendan Scott, Esq. Klestadt Winters et al., 570 Seventh Avenue, 17th Fl. New York, New York 10018	Line <u>See</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.14	Nesenoff & Miltenberg, LLP 363 Seventh Avenue, 5th Floor New York, New York 10001	Line <u>See</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.15	Hutchinson, Warren & Associates 122 South Rawles Street, Suite 200 Romeo, Michigan 48065-5606	Line <u>See</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.16		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.17		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.18		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.19		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.20		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.21		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.22		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.23		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.24		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.25		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.26		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ 0.00
5b. Total claims from Part 2	5b. + \$ 13,542,376.06
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ 13,542,376.06

Attachment  
Debtor: Adorn Fashions Inc. Case No:

**Attachment 1**

a/k/a Guangdong Wellful Holding Group Co. Ltd. 7/12th Floor, Hongxi Commercial Bldg.  
No. 23  
23 Guantai Road, Nancheng District

**Attachment 2**

**Alleged Misuse of Insurance Proceeds - Alleged Co-Debtor Liability is Disputed**

**Attachment 3**

3.107

**Attachment 4**

3.119

**Attachment 5**

3.120

**Attachment 6**

3.124

**Attachment 7**

3.132

**Attachment 8**

3.160

**Attachment 9**

3.163

**Attachment 10**

3.165

**Attachment 11**

3.166

**Attachment 12**

3.181

**Attachment 13**

3.189

Fill in this information to identify the case:

Debtor name Adorn Fashions Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (if known): \_\_\_\_\_ Chapter 7

Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Photocopier Lease	TGI Office Automation P.O. Box 642111
	State the term remaining		Pittsburgh Pennsylvania 15264
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name Adorn Fashions Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (If known): \_\_\_\_\_

Check if this is an amended filing

## Official Form 206H

### Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Does the debtor have any codebtors?**

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor				Column 2: Creditor	
	Name	Mailing address		Name	Check all schedules that apply:
2.1	<u>Morris Zinn</u>	234 Willard Drive Street		LSQ Funding Group L.C.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		Hewlett City	New York State	11557 ZIP Code	
2.2	<u>Barry Zinn</u>	300 East 71st Street Street		Changzhou Yidele Apparel Co. Ltd.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		New York City	New York State	10021 ZIP Code	
2.3	<u>Ricky Zinn</u>	300 East 71st Street Street		Philadelphia	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		New York City	New York State	10021 ZIP Code	
2.4		Street			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	ZIP Code	
2.5		Street			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	ZIP Code	
2.6		Street			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City	State	ZIP Code	

Attachment  
Debtor: Adorn Fashions Inc. Case No:

Attachment 1

EPK Financial Corp., Schedule D  
On Deck Capital, Inc., Schedule D  
Changzhou Yidele Apparel Co. Ltd., Schedule E/F  
Delmar International Inc., Schedule E/F  
Man Lei Cheung a/k/a Nina Cheung, Schedule E/F  
Licco Company Inc. a/k/a Licco Corp., Schedule E/F  
Shorenstein Realty Services East LLC, Schedule E/F  
Philadelphia Indemnity Insurance Co., Schedule E/F

Attachment 2

Indemnity Insurance Co.

Fill in this information to identify the case and this filing:

Debtor Name Adorn Fashions Inc.  
United States Bankruptcy Court for the: Southern District Of New York  
Case number (if known): \_\_\_\_\_

## Official Form 202

### Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

#### Declaration and signature

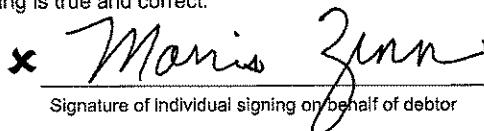
I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206–Summary)
- Amended Schedule* \_\_\_\_\_
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration* \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_  
MM / DD / YYYY

  
Signature of Individual signing on behalf of debtor

Morris Zinn  
Printed name

President  
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name	Adorn Fashions Inc.
United States Bankruptcy Court for the:	Southern District of New York
Case number (if known):	_____

Check if this is an amended filing

Official Form 207

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

12/15

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>05/01/2015</u> MM / DD / YYYY	to	Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____ \$ 1,638,926.00
<b>For prior year:</b>	From <u>05/01/2014</u> MM / DD / YYYY	to	<u>04/30/2015</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____ \$ 38,298,887.00
<b>For the year before that:</b>	From <u>05/01/2013</u> MM / DD / YYYY	to	<u>04/30/2014</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____ \$ 37,914,087.00

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From _____ MM / DD / YYYY	to	Filing date _____	\$ _____
<b>For prior year:</b>	From _____ MM / DD / YYYY	to	<u>MM / DD / YYYY</u>	\$ _____
<b>For the year before that:</b>	From _____ MM / DD / YYYY	to	<u>MM / DD / YYYY</u>	\$ _____

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,225. (This amount may be adjusted on 4/01/16 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>See Attached Schedule</u> Creditor's name _____	_____	\$ <u>0.00</u>	<input checked="" type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>See Attachment 1</u>
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		
3.2. _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,225. (This amount may be adjusted on 4/01/16 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. <u>To Be Provided</u> Insider's name _____	_____	\$ <u>0.00</u>	<u>Compensation/Expense Reimbursement</u>
Street _____	_____		_____
City _____ State _____ ZIP Code _____	_____		_____
<b>Relationship to debtor</b> _____			
4.2. _____	_____	\$ _____	_____
Insider's name _____	_____		_____
Street _____	_____		_____
City _____ State _____ ZIP Code _____	_____		
<b>Relationship to debtor</b> _____			

Debtor Adorn Fashions Inc.  
Name

Case number (if known) \_\_\_\_\_

## 5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

Creditor's name and address			Description of the property	Date	Value of property
<input type="checkbox"/> None  <b>5.1.</b> <u>LSQ Funding Group LC</u> <u>Creditor's name</u> <u>c/o Buchalter Nemar, P.C.</u> <u>Street</u> <u>55 Second Street, Suite 1700</u> <u>San Francisco</u> <u>CA</u> <u>94105</u> <u>City</u> <u>State</u> <u>ZIP Code</u>			<u>All Assets (Cash, Inventory, Receivables,</u> <u>Personal Property, Etc.)</u>	<u>See Attachment 2</u>	<u>\$</u> _____
 <b>5.1.</b> <u>Creditor's name</u> <u>Street</u> <u>City</u> <u>State</u> <u>ZIP Code</u>					<u>\$</u> _____

## 6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

<input checked="" type="checkbox"/> None	Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
	Creditor's name _____	_____	_____	\$ _____
	Street _____	_____	_____	
	City _____ State _____ ZIP Code _____	Last 4 digits of account number: XXXX- _____		

**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

Official Form 207

## Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 3

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Custodian's name and address	Description of the property	Value
Custodian's name	_____	\$ _____
Street	_____	Court name and address
City _____ State _____ ZIP Code _____	Case number	Name _____
	Case number	Street
	Date of order or assignment	City _____ State _____ ZIP Code _____

**Part 4: Certain Gifts and Charitable Contributions**

**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name	_____	_____	\$ _____
Street	_____		
City _____ State _____ ZIP Code _____			
Recipient's relationship to debtor	_____		
	_____		
9.2. Recipient's name	_____	_____	\$ _____
Street	_____		
City _____ State _____ ZIP Code _____			
Recipient's relationship to debtor	_____		

**Part 5: Certain Losses**

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</small>	Date of loss	Value of property lost
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Debtor Adorn Fashions Inc. Name Case number (if known) \_\_\_\_\_

**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1. <u>Pick &amp; Zabicki LLP</u>	<u>\$15,000 Fee - \$1,000 Filing Fee and Expenses</u>	<u>See Attachment 5</u>	<u>\$ 16,000.00</u>
<b>Address</b> <u>369 Lexington Avenue, 12th Floor</u>			
<b>Street</b> <u></u>			
<b>New York</b> <u>City</u>	<b>NY</b> <u>State</u>	<b>10017</b> <u>ZIP Code</u>	

**Email or website address**

dpick@picklaw.net

**Who made the payment, if not debtor?**

Barry Zinn

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2. <u></u>	<u></u>	<u></u>	<u>\$</u>
<b>Address</b> <u></u>			
<b>Street</b> <u></u>			
<b>City</b> <u></u>	<b>State</b> <u></u>	<b>ZIP Code</b> <u></u>	
<b>Email or website address</b> <u></u>			

**Who made the payment, if not debtor?**

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
<u></u>	<u></u>	<u></u>	<u>\$</u>
<b>Trustee</b> <u></u>			
<u></u>	<u></u>	<u></u>	<u></u>

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<p><b>Address</b>            Street _____            _____            City _____ State _____ ZIP Code _____</p> <p><b>Relationship to debtor</b>            _____</p>			
13.2. _____	_____	_____	\$ _____
<p><b>Address</b>            Street _____            _____            City _____ State _____ ZIP Code _____</p> <p><b>Relationship to debtor</b>            _____</p>			

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. _____ Street _____ _____ City _____ State _____ ZIP Code _____	From _____ To _____
14.2. _____ Street _____ _____ City _____ State _____ ZIP Code _____	From _____ To _____

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (*if known*) \_\_\_\_\_

**Part 8: Healthcare Bankruptcies**

**15. Healthcare bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name

Street

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name

Street

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

No.

Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

- No
- Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

No. Go to Part 10.

Yes. Fill in below:  
Name of plan \_\_\_\_\_

Employer identification number of the plan

EIN: \_\_\_\_\_

Has the plan been terminated?

- No
- Yes

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	HSBC Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-_____	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	November 2015	\$ 7,200.00
18.2.	JPMorgan Chase Bank Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-7 1 2 2	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	November 2015	\$ 0.00

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
	Address _____ _____	_____	

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Safeguard Storage Name _____ 1176 Broadway Street _____	Morris Zinn _____ _____	Documents _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Hewlett NY 11557 City _____ State _____ ZIP Code _____	Address _____	_____	

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium)
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____	_____	<input type="checkbox"/> Pending
_____	Street _____	_____	<input type="checkbox"/> On appeal
_____	City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	_____

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (*if known*) \_\_\_\_\_  
Name \_\_\_\_\_

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

No  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	
Street _____ _____	Street _____ _____	_____	
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name _____ Street _____ _____	_____	EIN: _____ Dates business existed _____
City _____ State _____ ZIP Code _____	From _____ To _____	
25.2. Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Name _____ Street _____ _____	_____	EIN: _____ Dates business existed _____
City _____ State _____ ZIP Code _____	From _____ To _____	
25.3. Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Name _____ Street _____ _____	_____	EIN: _____ Dates business existed _____
City _____ State _____ ZIP Code _____	From _____ To _____	

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address

26a.1. Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26a.2. Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address

Dates of service

26b.1. Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Name and address

Dates of service

26b.2. Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address

If any books of account and records are unavailable, explain why

26c.1. Name Morris Zinn

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (*if known*) \_\_\_\_\_

**Name and address**

If any books of account and records are  
unavailable, explain why \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

26c.2.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

**Name and address**

26d.2.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Name and address**

26d.2.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the inventory**

**Date of  
inventory**

**The dollar amount and basis (cost, market, or  
other basis) of each inventory**

LSQ Funding Group L.C.

06/30/2015

\$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name \_\_\_\_\_

Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor	Adorn Fashions Inc. Name	Case number (if known)	
Name of the person who supervised the taking of the inventory		Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
		\$	
Name and address of the person who has possession of inventory records			
27.2.	Name		
	Street		
	City	State	ZIP Code
28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.			
Name	Address	Position and nature of any interest	% of interest, if any
Morris Zinn	234 Willard Drive, Hewlett, NY 11557	President - Sole Shareholder	100
29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?			
<input type="checkbox"/> No			
<input checked="" type="checkbox"/> Yes. Identify below.			
Name	Address	Position and nature of any interest	Period during which position or interest was held
Ricky Zinn	300 East 71st Street, New York, NY 10021	COO - None	From 2008 To 2015
Barry Zinn	300 East 71st Street, New York, NY 10021	Vice-President - None	From 2010 To 2012
Ithan Zinn	300 East 71st Street, New York, NY 10021	Vice-President - None	From 2009 To 2012
			From _____ To _____
30. Payments, distributions, or withdrawals credited or given to insiders			
Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?			
<input type="checkbox"/> No			
<input checked="" type="checkbox"/> Yes. Identify below.			
Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Morris Zinn Name 234 Willard Drive Street			
Hewlett City	NY State	11557 ZIP Code	
Relationship to debtor			
President			

Debtor Adorn Fashions Inc. \_\_\_\_\_ Case number (*if known*) \_\_\_\_\_

**Name and address of recipient**

Ricky Zinn

Name

300 East 71st Street

Street

New York

NY

10021

City

State

ZIP Code

**Relationship to debtor**

Chief Operating Officer

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

No  
 Yes. Identify below.

**Name of the parent corporation**

**Employer Identification number of the parent corporation**

EIN: \_\_\_\_\_

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

No  
 Yes. Identify below.

**Name of the pension fund**

John Hancock

**Employer Identification number of the pension fund**

EIN: \_\_\_\_\_

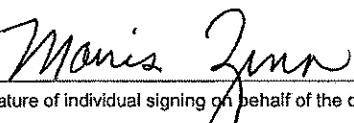
**Part 14: Signature and Declaration**

**WARNING** – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_  
MM / DD / YYYY,

  
Signature of individual signing on behalf of the debtor

Printed name Morris Zinn

Position or relationship to debtor President

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

No  
 Yes

Attachment  
Debtor: Adorn Fashions Inc. Case No:

Attachment 1

Customs Duties, Rent, Payroll, Insurance, Etc.

Attachment 2

November 2015

Attachment 3

Shorenstein Realty Services East LLC v. Adorn Fashions, Inc.

Attachment 4

Lorrie Joy Markman v. Adorn Fashions Inc.

Attachment 5

January 15, 2016

Adorn Fashions, Inc. - (SOFA Part 2) Payments to Creditors Within 90 Days Before Filing Totaling \$6,225 or More - 10/20/15-1/17/16

**Chase Account Ending 9383 (Operating & Payroll Account)**

Date	CheckNum	Type	Payee	Amount
11/10/2015	1001	Check	Bracco Agency Inc.,514 Larkfield Road, Suite 4BE,NPT, NY, United States11731	6,515.00
10/23/2015	53382	Check	The Gilbert Company1000 Riverside DriveKeasbey, NJ08832	11,278.32
10/23/2015	53401	Check	Delmar International Inc. 10636 Cot De Liesse, Lachine, QC, Canada H8T 1A5	8,462.96
10/27/2015	53407	Check	Capital Logistics & Warehouse Group Inc.30 Passaic StreetWood Ridge, NJ07075	6,998.31
10/27/2015	53408	Check	The Gilbert Company1000 Riverside DriveKeasbey, NJ08832	9,130.00
10/30/2015	53409	Check	The Gilbert Company1000 Riverside DriveKeasbey, NJ08832	11,017.20
11/2/2015	53422	Check	Cardmember ServicePO Box 15153Wilmington, DE19886-5153	2,000.00
11/4/2015	53426	Check	Cardmember ServicePO Box 15153Wilmington, DE19886-5153	2,000.00
11/18/2015	53432	Check	Chase Card ServicesCard Member Service, PO Box 15153Wilmington, DE, United States19886-5153	1,500.00
10/21/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	1,348.52
10/22/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	4,899.78
10/22/2015	ACH	ACH	OnDeck Capital Inc. 1400 Broadway, New York, NY 10018	3,717.95
10/23/2015	ACH	ACH	U S Customs ServicesBank Debit, United States	52,641.47
10/23/2015	ACH	ACH	Prestige Payroll Administrators (Regular Payroll)	43,940.84
10/27/2015	ACH	ACH	Card Member ServicePO Box 15153Wilmington, DE19886-5153	1,000.00
10/28/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	200.82
10/29/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	53.25
10/30/2015	ACH	ACH	OnDeck Capital Inc. 1400 Broadway, New York, NY 10018	3,717.95
10/30/2015	ACH	ACH	Prestige Payroll Administrators (Regular Payroll)	44,730.26
11/2/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	15,930.65
11/4/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	1,842.51
11/4/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	550.60
11/6/2015	ACH	ACH	OnDeck Capital Inc. 1400 Broadway, New York, NY 10018	3,717.95
11/6/2015	ACH	ACH	Prestige Payroll Administrators (Regular Payroll)	58,674.03
11/9/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	218.20
11/12/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	1,208.46
11/12/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	308.96
11/12/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	81.24
11/16/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	1,259.05
11/18/2015	ACH	ACH	Fedex P O BOX 371461PITTSBURGH, PA, United States15250-1461	278.44
11/25/2015	ACH	ACH	U S Customs ServicesBank Debit, United States	62,961.68
11/27/2015	ACH	ACH	SRI Eleven 1407 Broadway Operator LLCPO Box 419113BOSTON, MA02241-4061	21,000.00
11/27/2015	ACH	ACH	Card Member ServicePO Box 15153Wilmington, DE19886-5153	2,500.00
11/30/2015	ACH	ACH	SRI Eleven 1407 Broadway Operator LLCPO Box 419113BOSTON, MA02241-4061	7,390.25
11/5/2015	WT	WT	SRI Eleven 1407 Broadway Operator LLCPO Box 419113BOSTON, MA02241-4061	82,070.99
12/23/2015	ACH	ACH	U S Customs Services	18,204.21

**Chase Account Ending 5106 (Wire Transfer Account)**

10/29/2015	WT	WT	SRI Eleven 1407 Broadway Operator LLCPO Box 419113 BOSTON, MA02241-4061	10,000.00
10/30/2015	WT	WT	AME Express 901 W.Hyde Park Blvd., Inglewood, CA 90302	19,016.72

**Adorn Fashions, Inc. - (SOFA Part 3) Additional Legal Actions**

<u>Case Title</u>	<u>Case Number</u>	<u>Location</u>	<u>Nature of Case</u>	<u>Status</u>
Changzhou Yidele Apparel Co., Ltd. v. Adorn Fashions, Inc., <i>et al.</i>	24103/2015	Civil Court, NY County	Debt Collection	Pending
Man Lei Cheung v. Adorn Fashions, Inc., <i>et al.</i>	15-cv-8054	U.S. District Court, SDNY	Debt Collection	Pending
Markise Limited v. Adorn Fashions, Inc.	15-cv-8648	U.S. District Court, SDNY	Debt Collection	Pending
Philadelphia Indemnity Insurance Co. v. Adorn Fashions, Inc., <i>et al.</i>	654266/2015	Supreme Court, NY County	Debt Collection	Pending
Qingdao Sunwell Garments Co., Ltd. v. Adorn Fashions, Inc.	654133/2015	Supreme Court, NY County	Debt Collection	Pending
Suzhou Broadwide Imp. & Exp. Co., Ltd., <i>et al.</i> v. Adorn Fashions, Inc.	15-cv-6917	U.S. District Court, SDNY	Debt Collection	Pending
Xinda Huatai Imp. & Exp. Co., Ltd. v. Adorn Fashions, Inc.	15-cv-6128	U.S. District Court, SDNY	Debt Collection	Pending

United States Bankruptcy Court  
SOUTHERN DISTRICT OF NEW YORK

In re  
**Adorn Fashions Inc.**

Case No. \_\_\_\_\_

Debtor

Chapter 7 \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 15,000.00

Prior to the filing of this statement I have received ..... \$ 15,000.00

Balance Due ..... \$ 0.00

2. The source of the compensation paid to me was:

Debtor  Other (specify) **Barry Zinn**

3. The source of compensation to be paid to me is:

Debtor  Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

**Plus \$1,000.00 for filing fees and expenses.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Representation of the Debtor in adversary proceedings and other contested bankruptcy matters.**

<b>CERTIFICATION</b>	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.	
_____ Date	_____ Signature of Attorney
_____ Pick & Zabicki LLP Name of law firm	

**United States Bankruptcy Court**  
**Southern District of New York**

In re **Adorn Fashions Inc.**

Case No.

Debtor.

Chapter 7

**STATEMENT OF CORPORATE OWNERSHIP**

Comes now **Adorn Fashions Inc.** (the "Debtor") and pursuant to Fed. R. Bankr. P. 1007(a) and 7007.1 state as follows:

       All corporations that directly or indirectly own 10% or more of any class of the corporation's equity interests are listed below:

OR,

X There are no entities to report.

By:  
**Douglas J. Pick, Esq.**  
Signature of Attorney

Counsel for  
Bar no.:  
Address.: **369 Lexington Avenue, 12th Floor**  
**New York, New York 10017**

Telephone No.: **(212) 695-6000**

Fax No.: **(212) 695-6007**

E-mail address: **dpick@picklaw.net**

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK

In re: **Adorn Fashions Inc.**

Debtors

Case No. \_\_\_\_\_

Chapter 7

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: \_\_\_\_\_

Signed: Monis Zinn

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Attorney for Debtor(s)  
Bar No. \_\_\_\_\_

Telephone No.:

Fax No.:

E-mail address:

12K Apparel, Inc.  
1015 Croker Street  
#R37  
Los Angeles, CA 90021

24/Seven Inc.  
120 Wooster Street  
New York, NY 10012

7th Avenue Stationers, Inc.  
210 West 35th Street  
2nd Floor  
New York, NY 10001

Abercrombie Accounting Group  
517 Flinders Street  
Townsville City, Australia, QLD 4810

Accent Labels UK Ltd.  
Room 2302-2304 Well Tech Centre  
9 Pat Tat Street  
San Po Kong, Hong Kong,

AFLAC  
1932 Wynnton Road  
Columbus, GA 31999-6005

AJSE Inc. d/b/a Sant Fe Finishing  
2460 E. 12th Street  
Unit C  
Los Angeles, CA 90021

Alba Wheels Up International Inc.  
150-30 132nd Avenue  
Suite 208  
Jamaica, NY 11434

Alyce Zinn  
345 East 73rd Street  
Apt. 6G  
New York, NY 10021

AME Express  
901 W. Hyde Park Blvd.  
Inglewood, CA 90302

American Express  
P.O. Box 1270  
Newark, NJ 07101-1270

Annmarie Shapiro Menegaz  
8 Raleigh Avenue  
Cranford, NJ 07016

Aphrodite Fashion Solutions  
51 Bourke Road  
Alexandria, Australia, NSW 2015

APL Logistics  
16220 N. Scottsdale Road  
Suite 400  
Scottsdale, AZ 85254

Apparel Group  
250 Belmont Avenue  
Haledon, NJ 07508

Atlas Print Solutions  
589 8th Avenue  
4th Floor  
New York, NY 10018

Atradius Collections Inc.  
1200 Arlington Heights Road  
Suite 410  
Itasca, IL 60143

August  
21 David Street  
Richmond, Australia, VIC 3121

Automated Answering Systems  
224 West 30th Street  
Suite 805  
New York, NY 10001

Avery Dennison  
15178 Collection Centre Drive  
Chicago, IL 60693

Barry Zinn  
300 East 71st Street  
New York, NY 10021

BDO  
100 Park Avenue  
New York, NY 10017

Beauticurve  
16 Town Park, #5  
Little Rock, AR 72227

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